

 <p>Illinois Environmental Protection Agency Division of Air Pollution Control MC 40, P.O. Box 19276 Springfield IL 62794-9276</p> <p>APPLICATION FOR CLEAN AIR SET-ASIDE: AGGREGATION ADDRESS LISTING</p>	<p>APPLICATION TYPE</p> <p><input type="checkbox"/> Initial Application</p> <p><input type="checkbox"/> Renewal Application</p>	<p>FOR AGENCY USE ONLY</p> <p>Date Received:</p>
	<p>APPLYING FOR ¹</p> <p><input type="checkbox"/> Annual allowances</p> <p><input type="checkbox"/> Seasonal allowances</p>	

SECTION 1:	PROJECT SPONSOR IDENTIFICATION	
1) Project Sponsor:		
2) Principals Or Corporate Officials:		
3) Date Form Prepared: / /	4) Type Of Organization: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Individual <input type="checkbox"/> Other: _____	
5) CAIR NOx Annual Account Number:	6) CAIR NOx Seasonal Account Number:	
7) Authorized Account or Designated Representative:	8) Alternate Authorized Account or Designated Representative:	
9) Phone:	10) Email:	
Physical Location Of Project ²		
11) Address:	12) County:	
13) City:	14) State:	15) Zip Code:

SIGNATURE BLOCK
<p>16) "Project Sponsor" means a person or an entity, including but not limited to the owner or operator of an EGU or a not-for-profit group that provides the majority of funding for a CASA eligible project, unless another person or entity is designated by a written agreement as the project sponsor for the purposes of applying for NOx allowances from the CASA pursuant to 35 IAC 225.130.</p> <p>I certify that the person or entity named in box 1 above meets the above definition of "project sponsor": <input type="checkbox"/> YES <input type="checkbox"/> NO </p> <p>17) "I am authorized to make this submission on behalf of the project sponsor and the holder of the CAIR NOx general account or compliance account for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this application and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information."</p> <p>BY: _____</p> <p style="text-align: center;">AUTHORIZED SIGNATURE</p> <p>_____</p> <p style="text-align: center;">TYPED OR PRINTED NAME OF SIGNATORY</p> <p>_____</p> <p style="text-align: center;">TITLE OF SIGNATORY</p> <p>_____</p> <p style="text-align: center;">DATE</p>

1. Complete a separate application for the request of annual or seasonal allowances.
2. The address where all correspondence shall be mailed.
3. Rounding is completed at the final calculation; for intermediate calculations record to the nearest ten thousandth (i.e., 4 places).

SECTION 2:**PROJECT INFORMATION**

- 1) Utilize this form when aggregating multiple projects together for CASA allowances. The project sponsor may submit an application that aggregates two or more projects under a CASA project category that would individually result in less than one allowance, but that equal at a minimum of one whole allowance when aggregated.

#	Location Name	Street Address	City	Zip Code	Date Project Started	Date Project Completed	Basic Project Description
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